

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 08, 2000 8:00 am
Secretary of State

03-08-2000 90028 016 ***150.00

DOCUMENT # G84049

1. Entity Name

EFFECTIVE PERFORMANCE, INC.

Principal Place of Business

19900 GULF BLVD.
INDIAN SHORES FL 33785
US

Mailing Address

19900 GULF BLVD.
INDIAN SHORES FL 33511-8035
US

2. Principal Place of Business

4703 JOHN MOORE RD

3. Mailing Address

4703 JOHN MOORE RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BRANDON, FL

City & State

BRANDON, FL

4. FEI Number

59-2649316

Applied For

Not Applicable

Zip

33511

Country

Zip

33511

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VANVOORHIS, KENNETH R.WMS.
19900 GULF BLVD.
INDIAN SHORES FL 33785

7. Name and Address of New Registered Agent

Name
VANVOORHIS, KENNETH R WMS
Street Address (P.O. Box Number is Not Acceptable)
4703 JOHN MOORE RD
City BRANDON FL Zip Code 33511

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Kenneth R. Wms KR WMS VANVOORHIS, PRES MARCH 6, 2000
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD
NAME VANVOORHIS, KENNETH R WMS
STREET ADDRESS 19900 GULF BLVD.
CITY-ST-ZIP INDIAN SHORES FL 33785 ☐ Delete

TITLE VPD
NAME VANVOORHIS, BARBARA K WMS.
STREET ADDRESS 19900 GULF BLVD
CITY-ST-ZIP INDIAN SHORES FL 33785 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME VANVOORHIS, KENNETH R WMS
STREET ADDRESS 4703 JOHN MOORE RD
CITY-ST-ZIP BRANDON, FL 33511 ☒ Change ☐ Addition

TITLE VPD
NAME VANVOORHIS, BARBARA K WMS
STREET ADDRESS 4703 JOHN MOORE RD
CITY-ST-ZIP BRANDON, FL 33511 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kenneth R. Wms KR WMS VANVOORHIS, PRES MARCH 6, 2000 (813) 655-2749
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)